## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	form should be used of correspondence including below or directed of tions.	for transmitting the ISSI ng the Patent, advance on the patent, advance on the patent in Block 1, by (	UE FEE and PUBLICAT rders and notification of a a) specifying a new corre	ION FEE (if requiremaintenance fees vispondence address;	ired), l vill be and/o	Blocks 1 through 5 sh mailed to the current of r (b) indicating a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for
CURRENT CORRESPOND	Fee	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
68072	7590 05/21	/2010	nav				
	X GILMAN & MAH FERSON STREET	AN, P.S.C.	1 he Sta add trar	creby certify that th	is Fee(	e of Mailing or Transn s) Transmittal is being fficient postage for first 1SSUE FEE address a (1) 273-2885, on the da	deposited with the United class mail in an envelope above, or being facsimile te indicated below.
LOUISVILLE, 1	KY 40202	Holly Hart		· · · · · · · · · · · · · · · · · · ·	(Depositor's name)		
				Wools Ha	<u>J</u>		(Signature)
			<u>L</u>	august	17	2010	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTC	RNEY DOCKET NO.	CONFIRMATION NO.
10/594,830	10/594,830 07/12/2007			Didier Lancesseur P-1459			8392
TITLE OF INVENTION	: DEVICE FOR THE SI	NGLE-UNIT DISPENS	ING OF SHAPED OBJEC	TS, SUCH AS PHA	ARMA	CEUTICAL TABLETS	3
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0 \$1810		\$1810	08/23/2010
EXAMINER ART UN		ART UNIT	CLASS-SUBCLASS	]			
WAGGONER, TIMOTHY R 3651			221-167000	•			
"Fee Address" ind	ondence address (or Cha B/122) attached. ication (or "Fee Address 22 or more recent) attach	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)			
					ee is id	dentified below, the do	cument has been filed for
(A) NAME OF ASSI		(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
AIRSEC Choisy Le Roi, France							
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🚨 Co	rporat	ion or other private grou	up entity Government
4a. The following fee(s):  Issue Fee Publication Fee (N Advance Order - 4	To small entity discount p	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attractived. Paid by RAM through EFS We  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 033420 (enclose an extra copy of this form).					
5. Change in Entity Sta	tus (from status indicate s SMALL ENTITY state		☐ b. Applicant is no lon		•	TO 1	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if requeecords of the United Sta	uired) will not be accepte	d from anyone other than	he applicant; a regi	stered	attorney or agent; or the	assignee or other party in
Authorized Signature			Dat Agy 13 2010				
Typed or printed name Scott R. Cox				Registration N	o	31,945	
This collection of inform an application. Confident submitting the completed this form and/or suggesti	ation is required by 37 Ciality is governed by 35 I application form to the	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary then should be cent to the	on is required to obtain or a 1.14. This collection is est depending upon the indicate of the collection of the collecti	·-		ic which is to file (and to complete, including so on the amount of times of the complete of t	by the USPTO to process) gathering, preparing, and e you require to complete

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.